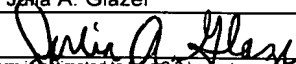


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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	7334			
	First Inventor or Application Identifier	Francis James Rourke			
	Title	Disposable Premoistened Wipe Containing An Antimicrobial Protease Inhibitor			
	Express Mail Label No.	EE829903162US			
APPLICATION ELEMENTS MPEP Chapter 600 concerning utility patent application contents.		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231			
1. <input checked="" type="checkbox"/> * Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)		5. <input type="checkbox"/> Microfiche Computer Program (Appendix)			
2. <input checked="" type="checkbox"/> Specification Total Pages [29] (preferred arrangement set forth below) <ul style="list-style-type: none">- Descriptive Title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R&D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure		6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable copyb. <input type="checkbox"/> Paper Copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identity of above copies			
3. <input type="checkbox"/> Drawing(s) (35 USC 113) Total Sheets <input type="checkbox"/>		ACCOMPANYING APPLICATION PARTS <ul style="list-style-type: none">7. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))8. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)9. <input type="checkbox"/> English Translation Document (if applicable)10. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations11. <input type="checkbox"/> Preliminary Amendment12. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)13. <input type="checkbox"/> *Small Entity <input type="checkbox"/> Statement filed in prior application Statement(s) Status still proper and desired14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)15. <input type="checkbox"/> Other:			
4. Oath or Declaration Total pages [2] <ul style="list-style-type: none">a. <input checked="" type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 16 completed)					
i. <input type="checkbox"/> DELETION OF INVENTORS Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR §§1.63(d)(2) and 1.33(b).					
* NOTE FOR ITEMS 1 & 13: IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. §1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. §1.28).					
16. If a CONTINUING APPLICATION , check appropriate box and supply the requisite information below and in the preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No. <u>1</u> Prior application information: Examiner: _____ Group/Art Unit: _____ *For CONTINUATION or DIVISIONAL only: The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.					
17. CORRESPONDENCE ADDRESS					
<input type="checkbox"/> Customer Number or Bar Code Label		(Insert Customer No. or Attach bar code label here)		<input checked="" type="checkbox"/> Correspondence address below	
NAME	Julia A. Glazer, Counsel - Patents				
	The Procter & Gamble Company				
ADDRESS	Winton Hill Technical Center				
	6100 Center Hill Avenue				
CITY	Cincinnati	STATE	OH	ZIP CODE	45224
COUNTRY	U.S.A.	TELEPHONE	513/634-3244	FAX	513/634-3612

Name (Print/Type)	Julia A. Glazer	Registration No. (Attorney/Agent)	41,783
Signature		Date	11/9/98

+ Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, D.C. 20231.

FEE TRANSMITTAL FORM

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16 (c))	20 - 20	0	x \$22.00 =	\$0
	INDEPENDENT CLAIMS (37 CFR 1.16 (c))	3 - 3	0	x \$82.00 =	\$0
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d))			+ \$270.00 =	\$
				BASIC FEE (37 CFR 1.16(a))	\$790.00
				Total of above Calculations -=	\$790.00
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).				
				TOTAL =	\$790.00

19. The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-2480. A duplicate copy of this sheet is enclosed.

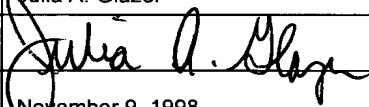
- a. ☒ Any patent application filing fees required under 37 CFR 1.16.
- b. ☒ Any patent application processing fees under 37 CFR 1.17.

20. The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 16-2480. A duplicate copy of this sheet is enclosed.

- a. ☒ Any patent application processing fees under 37 CFR 1.17.
- b. ☐ The issue fee set in 37 CFR 1.18 at or before mailing of the Notice of Allowance, pursuant to 37 CFR 1.311(b).
- c. ☒ Any filing fees under 37 CFR 1.16 for presentation of extra claims.

21. The total number of duplicate copies enclosed is 5. The Commissioner is hereby authorized to make any additional copies of this sheet needed to accomplish the purposes provided for herein and to charge any fee for such copies to Deposit Account No. 16-2480.

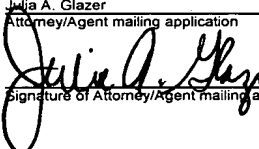
11. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	Julia A. Glazer
SIGNATURE	
DATE	November 9, 1998

"Express Mail" mailing label number EE829903162US

Date of Deposit November 9, 1998

I hereby certify that this paper/fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Assistant Commissioner for Patents, Washington, D.C. 20231.

Julia A. Glazer 41,783
 Attorney/Agent mailing application Reg No.

 Signature of Attorney/Agent mailing application

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